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March 9<sup>th</sup>  
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Paper March 22<sup>nd</sup> 1827

An W. S. H.

Inaugural Elocy  
on  
the Apprehension of  
the Epidemis.  
Presented to the  
Medical Professors  
of the University of Pennsylvania.

For the degree of  
Doctor of Medicine.  
By John S. Oscar, of Charleston, S.C.

Philadelphia.

1827.

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## Hepatitis.

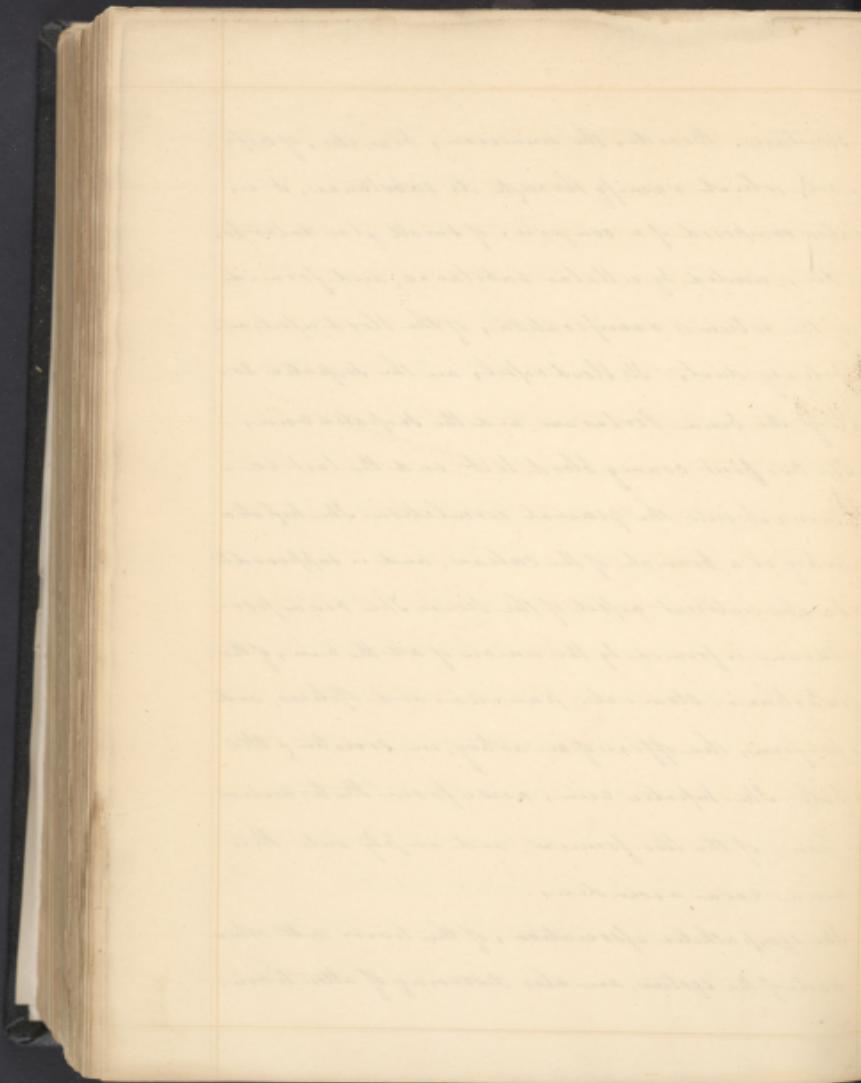
Before entering on the consideration of this disease, I shall notice briefly the structure and situation of the liver, and its more important connections with the rest of the system.

This organ occupies the right hypochondriac, the upper portion of the epigastric, and a small part of the left hypochondriac regions. Its superior convex surface is closely applied to the diaphragm to which it is attached by several processes of peritoneum called its ligaments. It is connected to the stomach below by another extension of peritoneum, the lesser omentum. The same membrane is continued over its surface, forming for it a complete coat. The right extremity of this organ is very thick, extending downwards to the margin of the ribs; while the left tapers to a thin edge, and lies in contact with the stomach. The liver is extremely vascular, and very compact in its structure.



structure. Besides the numerous branches of capillaries which ramify through its substance, it is also composed of a series of small glandular bodies, united by cellular substance, and formed by the ultimate ramifications of the blood and sub-  
biliary ducts. Its blood vessels are the hepatic artery, the veins Portae, and the hepatic veins -  
The two first convey blood to it, and the last re-  
turns it into the general circulation. The hepatic  
artery is a branch of the celiac, and is supposed to  
be the nutrient vessel of the liver. The veins por-  
tae are formed by the union of all the veins of the  
intestines, stomach, pancreas and spleen, and  
perform the office of an artery, in secreting the  
bile. The hepatic vein, arises from the termina-  
tion, of the two former, and empty into the  
vein cava ascendens.

The sympathetic associations of the liver with other  
parts of the system, are also deserving of attention.



Since they throw some light on the anomalous symptoms, which arise in diseases of this organ.

The sympathy between the liver and brain is familiar to every practitioner, headache, vertigo, & a disturbed state of mind being almost uniformly present in hepatic disorders.

Not less so, is the concert between the liver and stomach. This, is seen in hepatitis, in which nausea, vomiting with dyspeptic symptoms are common attendant.

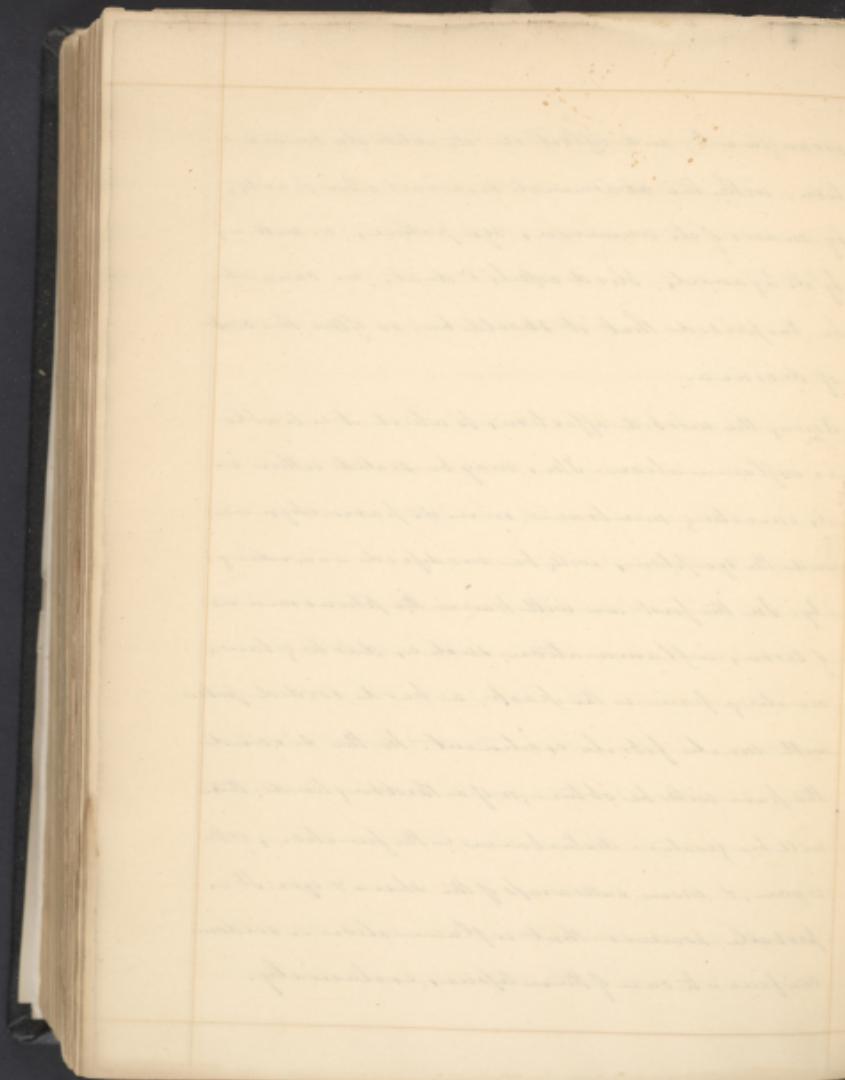
The last of these sympathies, which I shall notice, is that which exists between the liver & the external surface of the body. This, is one of the most important, as it explains the modes of origin of two very common causes of hepatic derangements, viz heat and sudden changes of temperature.

When we contemplate the structure of the liver, its immensity, size, and the peculiarity of its vascular



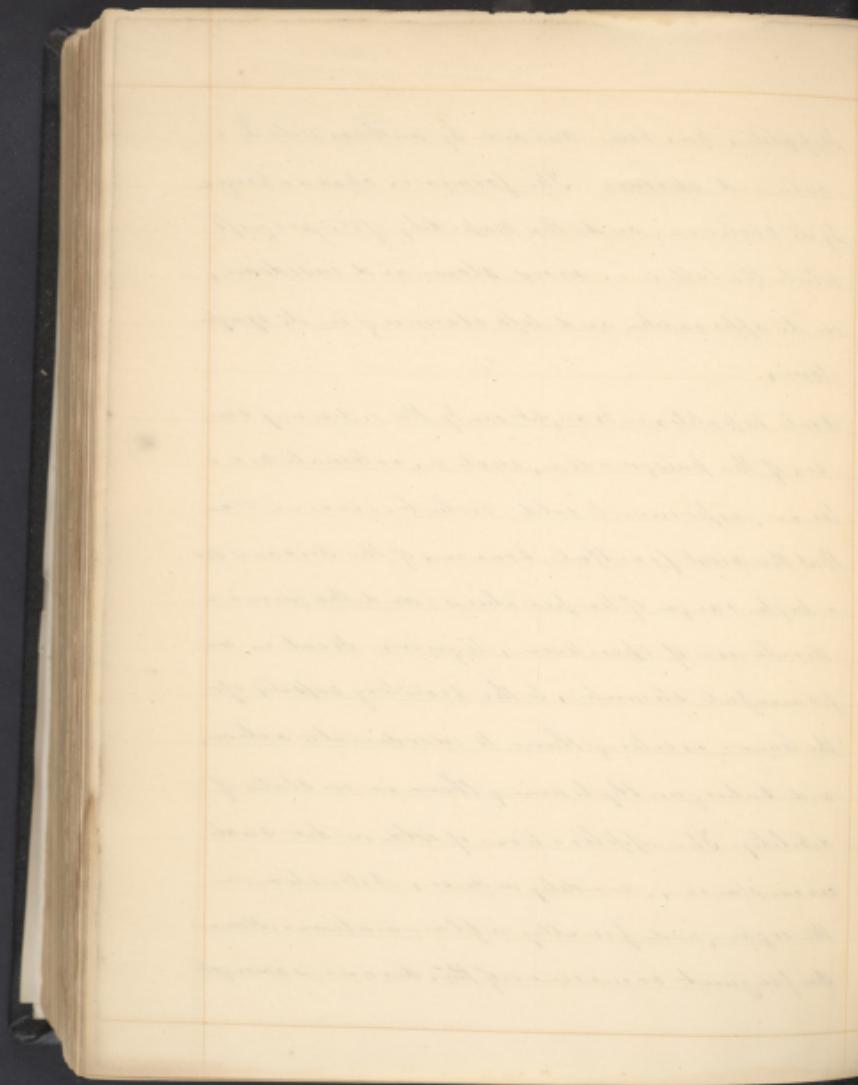
arrangement, and effect on its intestinal conser-  
tion, with the abdominal viscera & other parts,  
by means of its numerous sympathies, as well as  
by its ligaments, blood vessels & ducts, we cannot  
be surprised that it should be so often the seat  
of disease.

Among the morbid affections to which it is liable  
is inflammation. This may be seated either in  
its investing membranes, or in its parenchyma;  
and the symptom will be modified according-  
ly. In the first case will have the phenomena  
of secca, inflammations, such as darting lanci-  
inating pain in the part, a hard, corded pulse  
with much febrile excitement. In the second  
the pain will be obtuse, or of a throbbing kind, there  
will be greater disturbance in the functions of the  
organ, & more lallowness of the skin & eyes. It is  
probable, however, that inflammation is seldom  
confined to one of these spaces, exclusively.



Hepatitis has been divided by authors into acute and chronic. The former is characterized by its violence, and the rapidity of its progress; while the latter is more slow and insidious, in its approach, and less alarming in its symptoms.

Acute hepatitis is brought on by the ordinary causes of the phlegmonous, such as, external violence, exposure to cold, violent exercise &c. But the most fruitful sources of the disease are a high range of hyperthermia, and the immoderate use of spirituous liquors. Heat is a powerful stimulus to the secretory vessels of the liver, exciting them to inordinate action, and ultimately leaving them in a state of debility. The application of cold under such circumstances, secondly induces obstructions in the organ, and finally inflammations. Hence the frequent occurrences of this disease amongst



us, during the autumnal months, when the afternoon heat of the day, is followed by cold evenings. Ardent spirits operate in the same way as heat, producing at first high excitement, which is succeeded by a state of corresponding exhaustion. The male sex is said to be more liable to this disease than females, owing, no doubt, to their greater exposure, and their more <sup>improper</sup> habits.

Acute hepatitis, usually commences, with rigors, succeeded by pain in the right hypochondrium, shooting to the shoulder; heat of skin and considerable physician's cough, together with cough oppressed respiration and difficulty of lying on the left side; the pulse infrequent and hard, the tongue white and dry, with extreme thirst; the stool is sometimes, much disturbed, there is occasional vomiting; the bowels are constipated, and the stool, when passed,

and the first few hours of the morning  
was spent in getting up our supplies  
and then I rode over here again  
and took my gun and went up  
the valley. The weather was  
dry and warm, the thermometer  
was about seventy degrees when  
I started out. I saw a number of  
birds and animals, but did not  
see any deer or bear. I saw a  
number of birds and animals,  
but did not see any deer or bear.

show a deficiency of bile; the urine is high coloured and sparingly secreted. Throughout the case, the spirits are much depressed.

These symptoms vary in different <sup>cases</sup> according to the part of the organ affected. When the upper convex surface, or the ligaments which unite it to the diaphragm are inflamed, the cough, pain, and dyspnoea are more disturbing, and it has, in some cases, been mistaken for pneumonia. When on the contrary the causative portion is the seat of disease, the stomach is most disturbed, giving rise to many of the symptoms of gastritis. By a careful examination however, a sufficiently clear diagnosis may be obtained. From pneumonia it is distinguished, by the pain being lower down in the sides, and its being increased by pressure under the false ribs. The cough too, comes on much later than in pneumonia, while the evacuation, indicate greater de-



derangement of the biliary secretion, than occurs in the other plethorae. The position of the pain, its extending to the shoulder, together with the pallor of the skin will generally distinguish it from gastritis. It may readily be distinguished from spasms of the biliary ducts, with which it has, sometimes, been confounded, by the high febrile excitement, the frequency of pulse; the permanency of <sup>the</sup> pain; and by the patient being able to lie in a straight posture.

This disease most frequently ends in resolution or in suppurations. Its termination in resolution is denoted by a gradual subsidence of pain and febrile symptoms, with a return of the appetite & an improvement in the complexion. At other times, this event is attended by some critical discharges from the skin, bowels, or kidneys, or by a hemorrhage from the nose or hemorrhoidal vessels.

and in a few cases and very  
rarely the number of eggs  
will exceed 100. The number  
of eggs per female is not  
constant and varies with  
the species and the condition

Suppuration is a more common result of the disease, in hot climates, than with us. Its approach is announced by increase of pain, rigor, frequent full pulses, hot dry skin &c. A heavy dull uneasiness in the part, instead of acute pain, evening fever, hectic flushes, and night sweats, denote the formation of matter.

The abscess when formed is variously described. If no adhesion take place with contiguous parts, it bursts into the cavity of the abdomen, bringing on peritoneal inflammation, which quickly terminates, in death. Sometimes, adhesions are formed with the abdominal parieties, the matter escaping externally. At others, the abscess opens into some portion of the intestinal canal & the pus passes off with the stools. The last are the most favourable route, for the matter, and frequent cures are said to have been effected in this way. Occasionally the mat-

the first time I have seen a specimen of  
this species. It is a small bird, about  
the size of a sparrow, with a dark  
brown back, a white belly,  
and a white patch on each wing.  
It has a short, pointed beak  
and a short tail. The feathers  
are dark brown, with some  
lighter spots on the wings.  
The legs are short and strong,  
and the feet are large and webbed.  
The bird is very active and  
is often seen flying over the water  
in search of food. It is a  
common bird in the  
marshes and swamps of the  
southern United States.

matter finds its way through the diaphragm into the lungs & is brought up by coughing; or else it is effused into the cavity of the thorax, forming empyema. The prognosis in this case is very unfavourable, the recoveries have taken place under these circumstances.

From the history which has been given of this disease, the indications of cure are obvious; viz to subdue inflammation, and to rectify theiliary secretions. Emesisction is coindally required, and must be used with freedom; repeating it as often as it is demanded by the pain and the state of the pulse. Topical bleeding is scarcely of less importance. Caps or leeches are to be applied to the sides, and may be continued, even when the lancet, is no longer admissible. Having avoided general & local blood-letting to a sufficient extent, a large blister should not be placed over the part, and may be either covered,

Die zweite ist die Spur der Kiefer ab  
der rechten Seite und ist die längste und größte  
Spur, welche ich bis jetzt gesehen habe. Die dritte ist  
eine sehr schwache Spur, die nur auf einer  
sehr kleinen Stelle zu sehen ist. Die vierte ist  
eine Spur, die auf einer Stelle zu sehen ist,  
die nicht so stark wie die anderen ist, aber  
doch sehr deutlich. Die fünfte ist eine Spur  
die auf einer Stelle zu sehen ist, die nicht so  
stark wie die anderen ist, aber doch sehr  
deutlich. Die sechste ist eine Spur, die auf einer  
Stelle zu sehen ist, die nicht so stark wie die anderen ist, aber  
doch sehr deutlich.

or the blistered surfaces may be dressed with some  
stimulating ointment. While we are employing these  
means, purgatives must not be omitted. One  
of the most usual effects of inflammation, is to de-  
range the function, of the organ in which it oc-  
curs. This is the case in hepatitis; purgatives  
therefore, and particularly the mercurial, from  
the property which they possess of emulging the bili-  
ary ducts, and improving the hepatic secretion,  
are invaluable remedies in this disease. Calomel  
should be given in large doses, and its operation  
on the bowels quickened by the neutral salt, or  
jelap. In the tropical climate, mercury is gene-  
rally used to produce ptyalism in the early stage  
of this disease. But the practice tho' perhaps  
proper in those countries, is not admissible  
here. As auxiliary to the foregoing measures, the  
antiphlogistic regimen must be strictly enjoined.  
The patient's food should consist of the least stim-

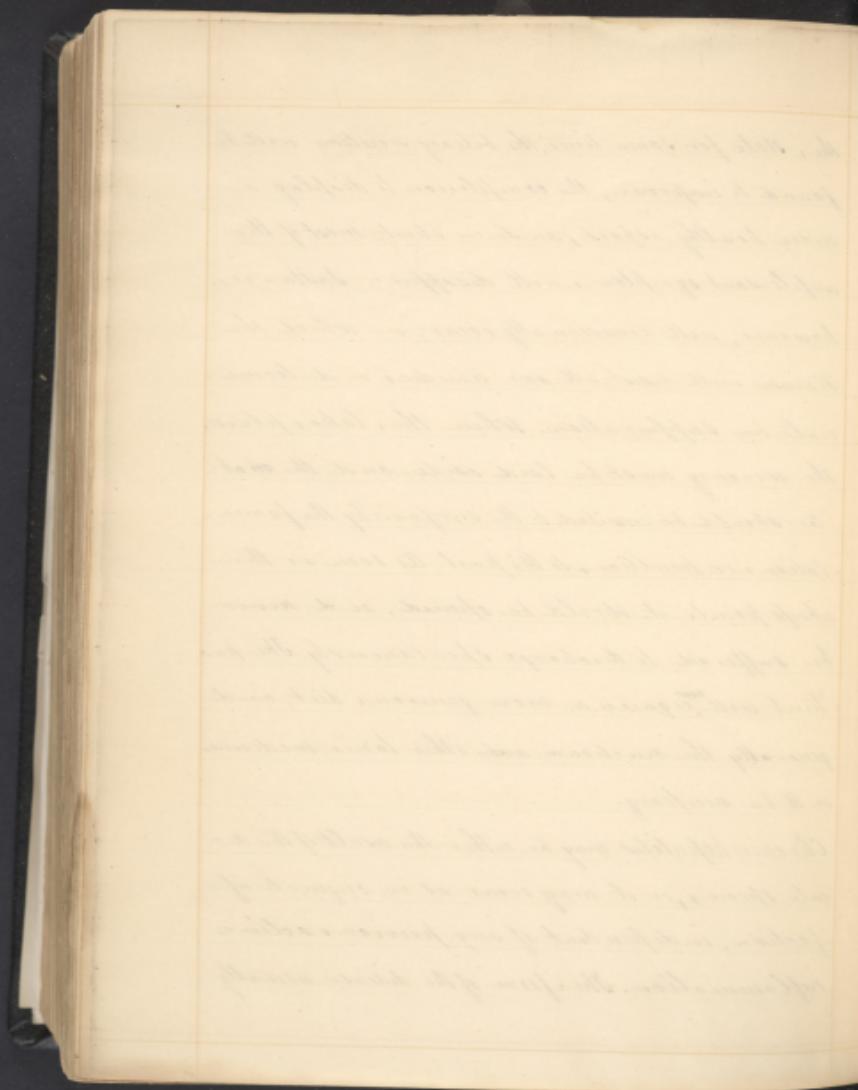
and the body of a single bullet. In  
the first place we will have to discuss  
the different types of projectiles, and  
then we will study the effect of each type  
of projectile on the target. We will also  
discuss the effect of different types of  
ammunition on the target. Finally, we will  
discuss the effect of different types of  
bullets on the target. This will help us  
to understand the different types of  
bullets and their effects on the target.

stimulating articles of diet, as thin gruel, or arrow-root jelly, barley water, toast-water &c. &c. &c. drink, should be of a cooling nature, as lemonade, apple water &c. By these means properly directed, we will generally succeed in subduing the disease. But should it prove obstinate, we must then resort to mercury as a salagogous. It should be given until it affects the mouth slightly; a profuse salivation is both disagreeable and unnecessary. For this purpose one or two grains of calomel, or three or four of the blue pill may be given at bed-time. If we wish the medicinal action to be more speedily induced, we may direct a drachm or two of the mercurial ointment, to be rubbed into the inner part of the thighs every night & morning. As soon as a languor of the parts is complained of by the patient, the medicine should be discontinued or its quantity reduced. By keeping him in

and a long time ago  
Dwelt the world over  
in a land of  
mists and  
clouds, where  
the sun  
was hidden  
in the mist,  
and the  
air was  
filled with  
the voices  
of the  
birds.  
The birds  
were  
of all  
kinds,  
and  
they  
sang  
all day  
long,  
and  
the  
people  
listened  
to their  
singing  
and  
were  
very  
happy.  
But  
one  
day  
the  
sun  
came  
out  
from  
behind  
the  
clouds,  
and  
the  
people  
were  
very  
surprised  
at  
the  
bright  
light,  
and  
they  
ran  
away  
from  
the  
place  
where  
they  
had  
been  
living,  
and  
they  
have  
never  
been  
seen  
since.

This state for some time, the biliary secretion will be found to improve, the complexion to display a more healthy aspect, and in short, most of the unpleasant symptoms, will disappear. Instances, however, will occasionally occur, in which the disease will visit all our nerves, and terminate in suppuration. When this takes place, the mercury must be laid aside, and the patient should be invited to the surface by the fomentations or poultices, to the part. As soon as the abscess points, it should be opened, and never be suffered to discharge spontaneously. The patient will require a more generous diet, and generally the sanguineous and other tonic medicines, will be necessary.

Chronic hepatitis may be either the result of the acute species, or it may occur as an original affection, independent of any previous active inflammation. This form of the disease usually



creeps on very insensibly, and sometimes continues its progress for a considerable time, without giving the patient much inconvenience, or else it puts on the guise of dyspepsia or some other disease, and thus runs on unchecked.

Cases are occasionally, in which the liver on dissection, has been found, completely disorganized, tho' no symptoms during the patient's life-time, indicated disease in this part.

In most cases, however, a train of symptoms present themselves, which to the attentive observer will point out the true nature of the disease. The patient becomes inactive, and averse to any exertion of body or mind; he is overcome with drowsiness and lassitude, particularly after meals. The bowels are torpid, and the evacuations, when they take place, are unhealthy; the urine is turbid depositing a latriferous sediment; the skin is dry & harsh; the comple-



complexion pale and sallow; the pulse is frequent  
and often intermit, from the obstruction of the  
circulation in the liver; dull oblique pain is felt  
in the right side, the sometime, it is confined  
to the left; in other cases there is merely a sense  
of weight & distension in the part. After a time  
the stomach is painful; the appetite is capri-  
cious; the tongue heavily loaded; and flatulence  
sour excretion, and other signs of impaired  
digestion make their appearance. The patient  
now becomes gloomy and desponding and  
loses his relish for society. In the progress of the  
disease the liver becomes increased in volume,  
and may be felt extending below the margin  
of the ribs. Not unfrequently the lungs at this per-  
iod take on disease, either from the encroach-  
ment of the enlarged liver, or from a molar-  
tasis of morbid action. There is then, much  
difficulty of breathing, with a dry tickling cough.



the case strongly resembling asthma. In other instances, the lungs are more seriously affected; purulent expectoration takes place; hectic fever comes on; the patient wastes away, and dies with all the symptoms of true phthisis pulmonary.

The causes of primary chronic hepatitis are the same as those of the acute species, but acting more slowly & fully. Of these by far the most general in its operation, is the habitual use of intoxicating liquors. The injurious effects of these articles, on the liver is a subject of such common observation, that a timid abdomen & sallow complexion, are considered as certain characteristics of the intemperate, as his faltering speech and unsteady gait.

When the disease succeeds the acute species, it is in most cases, to be ascribed to the neglect of sufficient convalescences, or to the too early employ-

the author of the present paper  
and that it is evidently  
done away the name of the  
writer is not to be had with  
any particular accuracy.  
However an attempt will be  
made to give the author of the  
present paper as much justice as  
possible and it is my wish to add  
that you do not have to go far to  
find a well educated man

ment of tonics, and stimulants.

Chronic hepatitis seldom continues, for any length of time, without inducing various alterations in the organization of the liver. The most common is an enlargement of the organ from congestion. In which cases large quantities of blood are collected in its vessels; this, in some instances, escapes, into the intestinal canal, and gives rise to the disease termed Melana.

The liver is frequently found increased in size, without any material alteration in its structure; the enlargement arising from a deposit of interstitial matter in its paracapillaries. A remarkable case of this kind is related by Johnson, in which the liver weighed forty pounds.

A condition of the organ very different in appearance from the preceding, is often met with, where it is indurated & much diminished in volume, many of its vessels being oblitera-

W. 1000 ft. above the sea level  
The surface of the land is very uneven  
and broken up into many small hills  
and depressions. The soil is very poor  
and thin, consisting mostly of sand and gravel  
with some fine silt. The vegetation is sparse  
and consists mainly of low-growing plants  
such as grasses, herbs, and small shrubs.  
There are also a few patches of scrubland  
and some isolated trees, particularly on the  
higher ground. The climate is hot and dry,  
with temperatures ranging from 20°C to 30°C  
and rainfall being relatively low, around 500 mm per year.

-ted. This is a common effect of chronic inflammations in glandular bodies, and to which the term scirrhus has been applied.

There are other affection's of the liver, supposed to result from chronic inflammation, which are of a more formidable nature. These are tubercles, which occasionally occupy the greater portion of this organ, giving to its surface an irregular appearance.

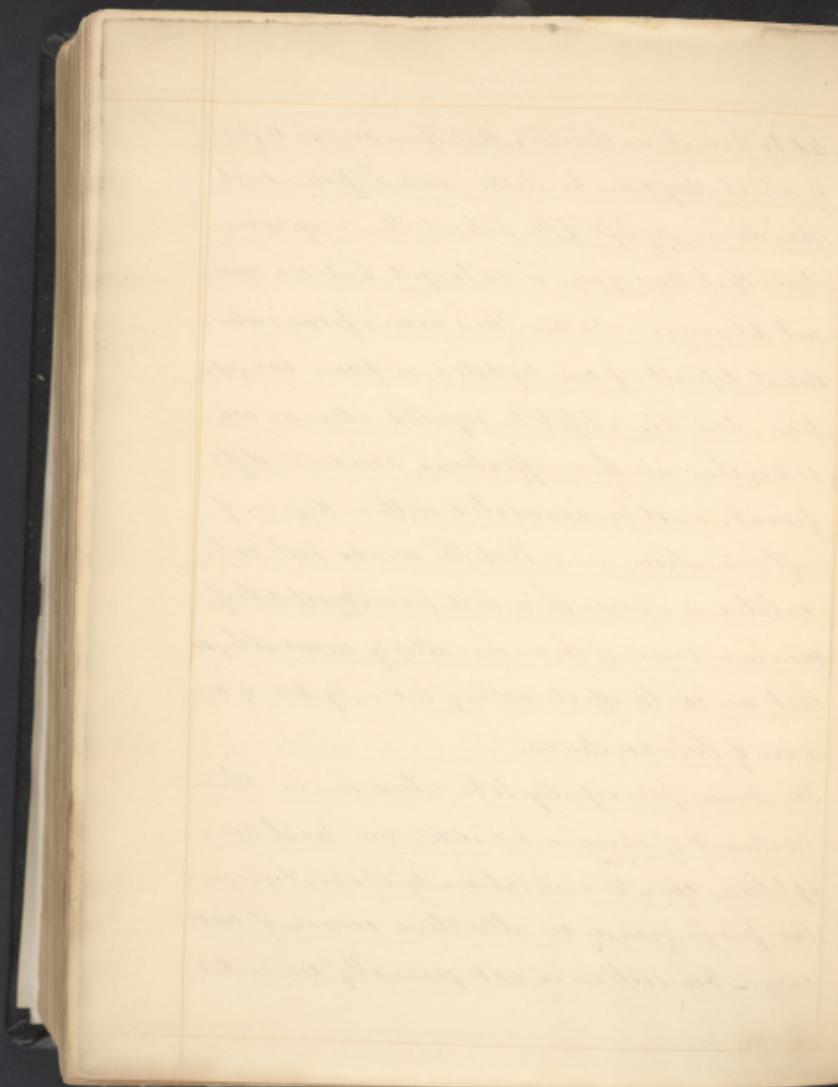
Hydatids are also sometimes found attached to its peritoneal coat, or deeply seated in its substance. The nature of these bodies is not well understood; they are supposed by Baillie to be "a sort of imperfect animalcules". In some cases they become of an immense size, containing a considerable quantity of fluid. Thomas mentions an instance where sixteen pints of water were drawn off from an hydatid situated in the liver.

These are the different conditions in which the liver is found, on dissection. But it is admit-

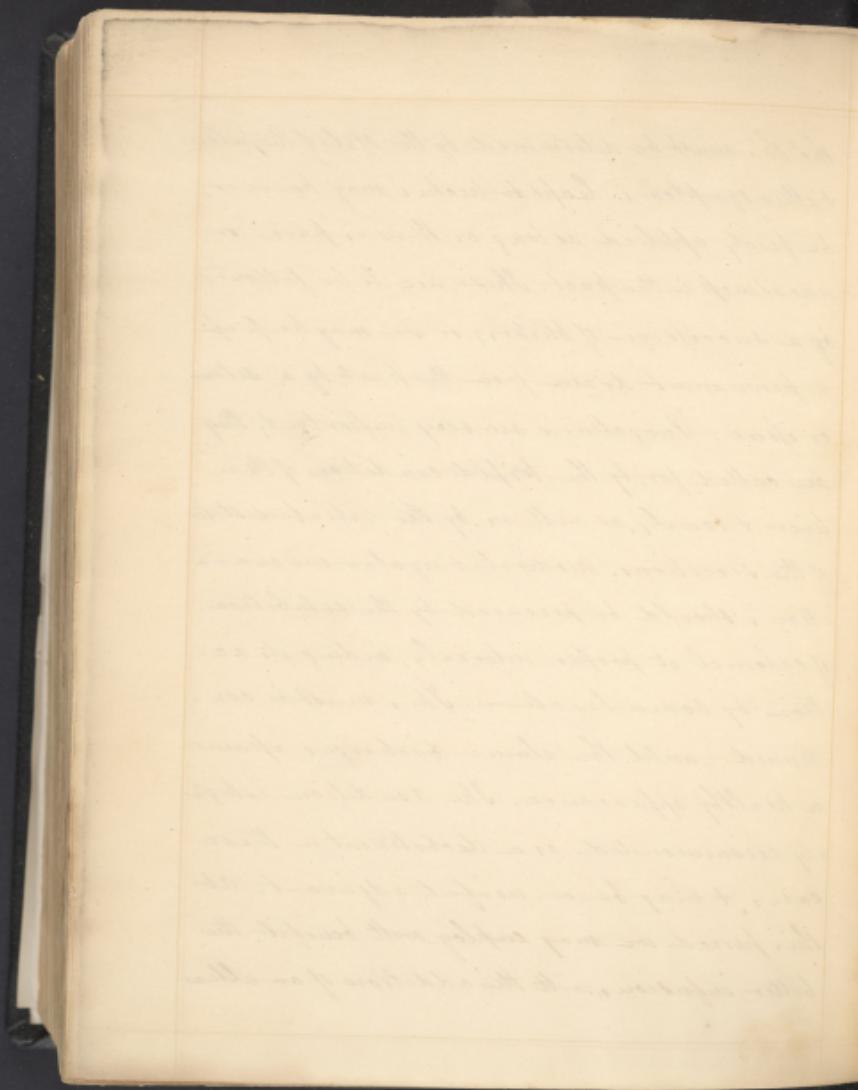
and it will be well to do so in order  
to keep up the interest of the audience  
and to make the performance more  
interesting. You will find that the  
audience is very interested in your  
lectures if you speak in a clear, distinct  
voice, and if you make  
your lecture full of interest and  
variety of matter and if you have  
a good story or two to tell.  
The audience will be very pleased  
if you speak in a clear, distinct voice  
and if you make your lecture full of  
interest and variety of matter and  
if you have a good story or two to tell.

ted by the best authorities, that there are no signs  
by which they can be distinguished from each  
other, during the life of the patient. We may ascer-  
tain that the organ is enlarged, but we can-  
not determine whether this arises from intera-  
stitial deposit, from hydatid, or from conges-  
tion. And this is left to be regretted when we con-  
sider, that all these affections, however dif-  
ferent, must be connected with a degree of  
inflammation, and that the means best cal-  
culated to remove this, will give most relief.  
Moreover, some of them are utterly incurable, so  
that we could effect nothing more, by being a-  
ware of their existence.

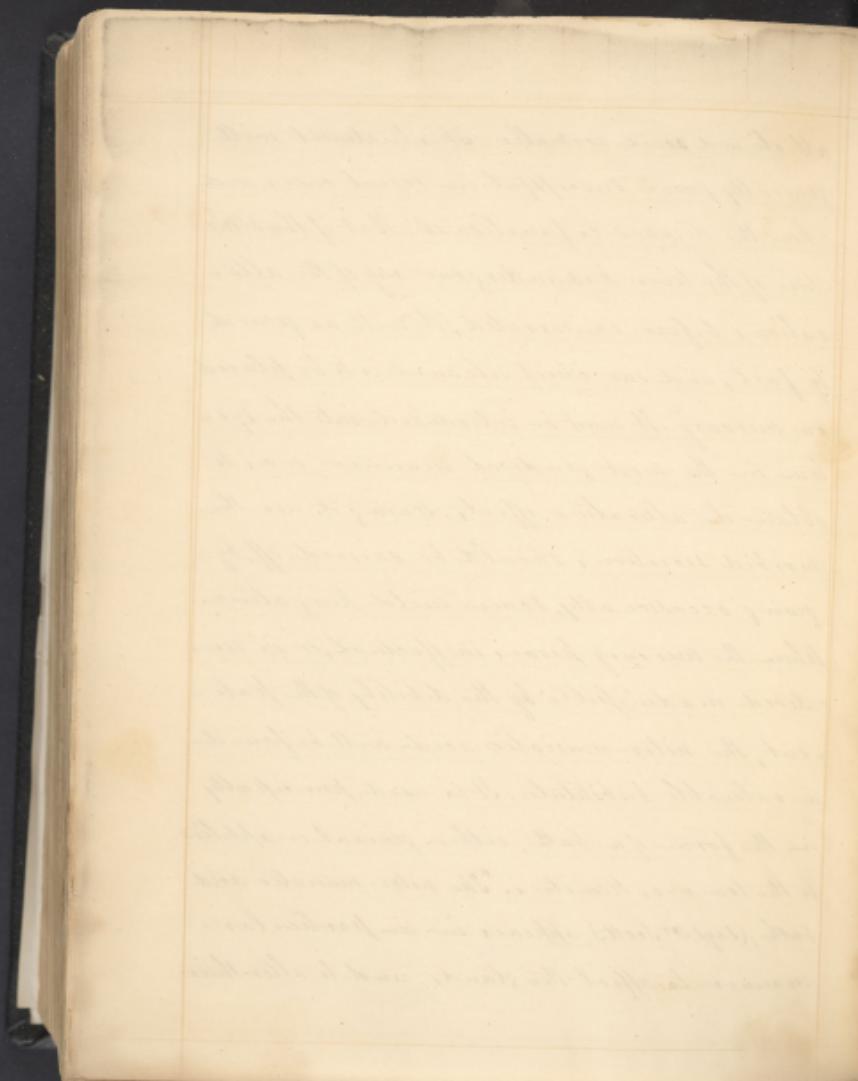
The means principally to be relied on in the  
treatment of chronic hepatitis are, local de-  
pletions; counter-irritations by blisters, &c; segua-  
lar purging; and an alterative course of two  
cure. — Emulsions are not generally recommended



the flux must be determined by the state of the pulse  
& other symptoms. Leaps & leeches may however,  
be freely applied as long as there is pain or  
uneasiness in the part. These are to be followed  
by a succession of blisters; or we may keep up  
a permanent drain from the part by a seton  
or ipse. Purgatives are very important; they  
are called for, by the torpid condition of the  
liver & bowels, as well as by the vitiated state  
of the secretions. Moderate & regular evacua-  
tion, should be procured by the exhibition  
of calomel at proper intervals, aiding its ac-  
tion by some laxative. This must be con-  
tinued until the sanguine discharge assumes  
a healthy appearance. The dandelion is high-  
ly recommended as a deobstruent in these  
cases, & may be a useful adjunct. At  
this period we may employ with benefit, the  
bitter infusions, with the addition of an alka-



alkali and some astringent. This treatment will generally prove successful in recent cases, and where the disease is functional. But if the structure of the liver has undergone any of the alterations before enumerated, it will as generally fail, and our chief reliance is to be placed on mercury. It must be introduced into the system in the most gradual manner, so as to obtain its alterative effects. During its use the morbid secretion, should be carried off, by giving occasionally, some mild purgatives. Where the mercury proves ineffectual, or is rendered inadmissible by the debility of the patient, the nitro-muriatic acid will be found a valuable substitute. It is used principally in the form of a bath, either general or applied to the lower extremities. The nitro-muriatic acid bath, (says Dr. Scott,) appears in a peculiar manner to affect the glands, and to alter their



secretions; and on this power a great part of  
its value, in derangements of the liver, seems to  
depend. It sometimes, very suddenly increases,  
the secretion of bile; and this effect may be  
kept up for a length of time".

In addition to these active remedies, the diet of  
patient requires some attention. His food should  
be simple and plainly dressed; and he should  
be cautioned against exceeding the bounds of  
moderation, which he is apt to do, the appetite be-  
ing often unimpaired. All crude, acrid, or  
gittery, pasty, soups, oily meat, and highly  
seasoned dishes, must be prohibited.

The warm bath, succeeded by friction, is a use-  
ful auxiliary in the cure of this disease. It re-  
vives the internal organs, and by keeping up  
a moderate action on the skin, promotes the  
biliary secretions. —

